

<div>Department of Health and Human Services</div> <div>Public Health Service</div> <div>FOOD AND DRUG ADMINISTRATION</div>		<div>INTERSTATE MILK SHIPPERS REPORT</div> <div>(Submit an original and two copies to the FDA Regional Office)</div>				<div>INTERNAL USE ONLY</div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>								
1. NAME OF SHIPPER					2. CITY			3. STATE						
4. STREET					5. PLANT or BTU NO.			6. PRODUCT CODE NOS.						
7. SURVEY DATA														
		PRODUCERS		RECEIVING OR TRANSFER STATIONS	PASTEURIZATION OR DRYING PLANT ¹			ENFORCEMENT						
		TYPE OF RATING <input type="checkbox"/> AREA <input type="checkbox"/> INDIVIDUAL												
RATING (%)														
DATE OF RATING														
TOTAL NUMBER								<div>APPENDIX N</div> <div>IS THE SHIPPER IN COMPLIANCE WITH THE PROVISIONS OF APPENDIX N?</div> <div><input type="checkbox"/> YES <input type="checkbox"/> NO</div>						
NUMBER INSPECTED														
VOLUME RECEIVED DAILY (Cwt)														
RATING AGENCY <input type="checkbox"/> SHD <input type="checkbox"/> SDA <input type="checkbox"/> OTHER _____		CERTIFIED STATE RATING OFFICER			OFFICER'S CERTIFICATION EXPIRATION DATE			EARLIEST RATING DATE						
								MONTH		DAY		YEAR		
AGENCY PROVIDING CONTINUOUS SUPERVISION OF SUPPLY														
8. LABORATORY CONTROL														
APPROVED LABORATORY NUMBER		EXPIRATION DATE		PROCESSED MILK TESTS APPROVED					RAW MILK TESTS APPROVED					
a. _____		a. _____		SPC	COLI	PHOS	RBC	DRUG RESIDUE TESTS	VIABLE COUNTS	SOMATIC CELL COUNTS		DRUG RESIDUE TESTS		
b. _____		b. _____		a. ____ b. ____	a. ____ b. ____	a. ____ b. ____	a. ____ b. ____	a. ____ b. ____	a. ____ b. ____	a. ____ b. ____		a. ____ b. ____		
DATE OF LAST TWO SPLIT SAMPLES a. _____ a. _____ b. _____ b. _____				APPROVED WATER LABORATORY AND DATE					WATER TESTS APPROVED					
9. PUBLICATION (Written permission from shipper must be filed at Regional office of FDA prior to publication of ratings)														
LETTER OF PERMISSION TO PUBLISH IS TRANSMITTED WITH THIS REPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO														
10. SUBMISSION OF REPORT BY STATE AGENCY														
DATE OF REPORT		SUBMITTED BY (Signature and Title)												
FOR FDA REGIONAL OFFICE USE ONLY														
Written permission from shipper dated _____ on file and publication of rating recommended.														
DATE		SIGNATURE (FDA Milk Specialist)												
<div>¹Submit separate form for each pasteurization plant or drying plant.</div>														

- [illegible]

Completed forms must be received by the Milk Safety Branch (HFS-626) prior to March 1, June 1, September 1, or December 1 to be included in the next quarterly listing.

Additional explanation is offered for the following items:

Item 1 - Name of Shipper

Limit shippers name to not more than 27 characters and spaces. Suggested abbreviations are published quarterly in the Interstate Milk Shippers List.

Item 5 Plant/BTU - When the permit number is less than 5 digits, leave the left spaces blank.

Item 6 Product Code - Enter product codes starting in the first (left hand) space. Product codes are listed below.

1. Raw Milk for Past. (may include lowfat, skim or cream)
2. Past-Milk, Lowfat, Skim
3. Heat Treated (may include skim, lowfat or cream)
4. Past. Half & Half, Coffee Cream, Creams
5. Ultra Past. Milk and Milk Products
6. Aseptic Milk & Milk Products (including flavored)
7. Cottage Cheese (including lowfat, dry curd)
8. Cultured or Acidified Milk & Milk Products
9. Yogurt (including lowfat, skim)
10. Sour Cream Products (acidified, cultured)
11. Whey (liquid)
12. Whey (condensed)
13. Whey (dry)
14. Modified Whey Products (condensed, dry)
15. Condensed Milk & Milk Products
16. Nonfat Dry Milk
17. Butter Milk (condensed or dry)
18. Eggnog
19. Lactose Reduced Milk & Milk Products
20. Low-Sodium Milk and Milk Products
21. Milk & Milk Products with added safe & suitable microbial organisms (such as *Lactobacillus acidophilus*)
22. Dry Milk
23. Anhydrous Milk Fat
24. Cholesterol Modified Anhydrous Milk Fat
25. Cholesterol Modified Fluid Milk Products
26. Cream (condensed or dry)
27. Blended Dry Products
- 28 - 30. (Reserved)
31. Raw Goat Milk for Pasteurization
32. Pasteurization Goat Milk & Milk Products
33. Cultured Goat Milk & Milk Products
34. Condensed or Dry Goat Milk & Milk Products
35. Ultra Pasteurized Goat Milk & Milk Products
36. Aseptic Goat Milk & Milk Products
37. Raw Sheep Milk for Pasteurization
38. Cultured Sheep Milk & Milk Products